

18



TRIAL PRODUCT TRADE NAME
TRIAL PRODUCT GENERIC NAME
TRIAL PRODUCT FORM & STRENGTH
TRIAL PRODUCT QUANTITY

CARD SERIAL NUMBER
CARD EXPIRATION DATE

Figure 2A

18



Physician Approval Code
[][][][]

Pharmacist Approval Code
[][][][]

Physician Signature

Pharmacist Signature

Patient Signature

Figure 2B

AUTHORIZER ID NUMBER

AUTHORIZER NAME
CARD EXPIRATION DATE

Figure 3A

20



Authorizer Signature

Figure 3B

20



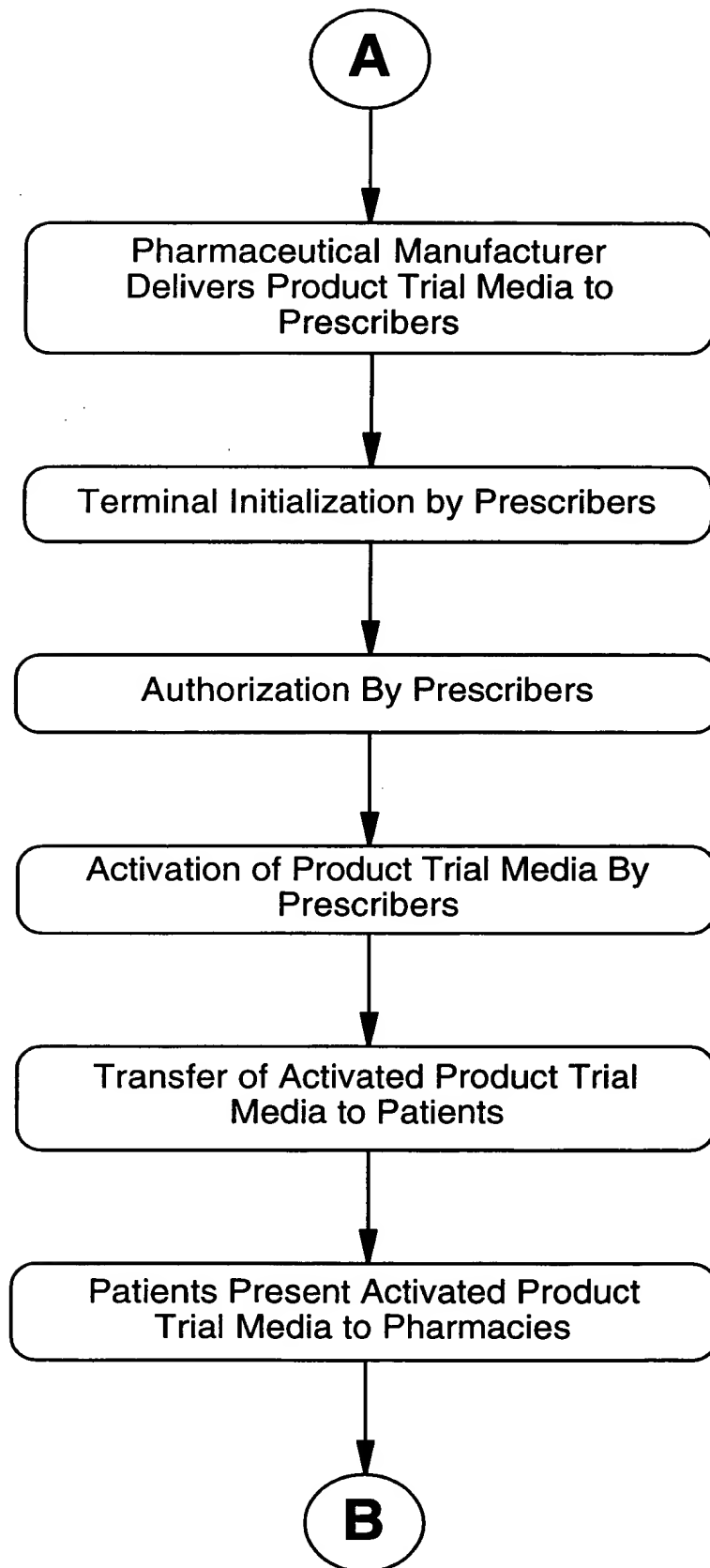


Figure 4A

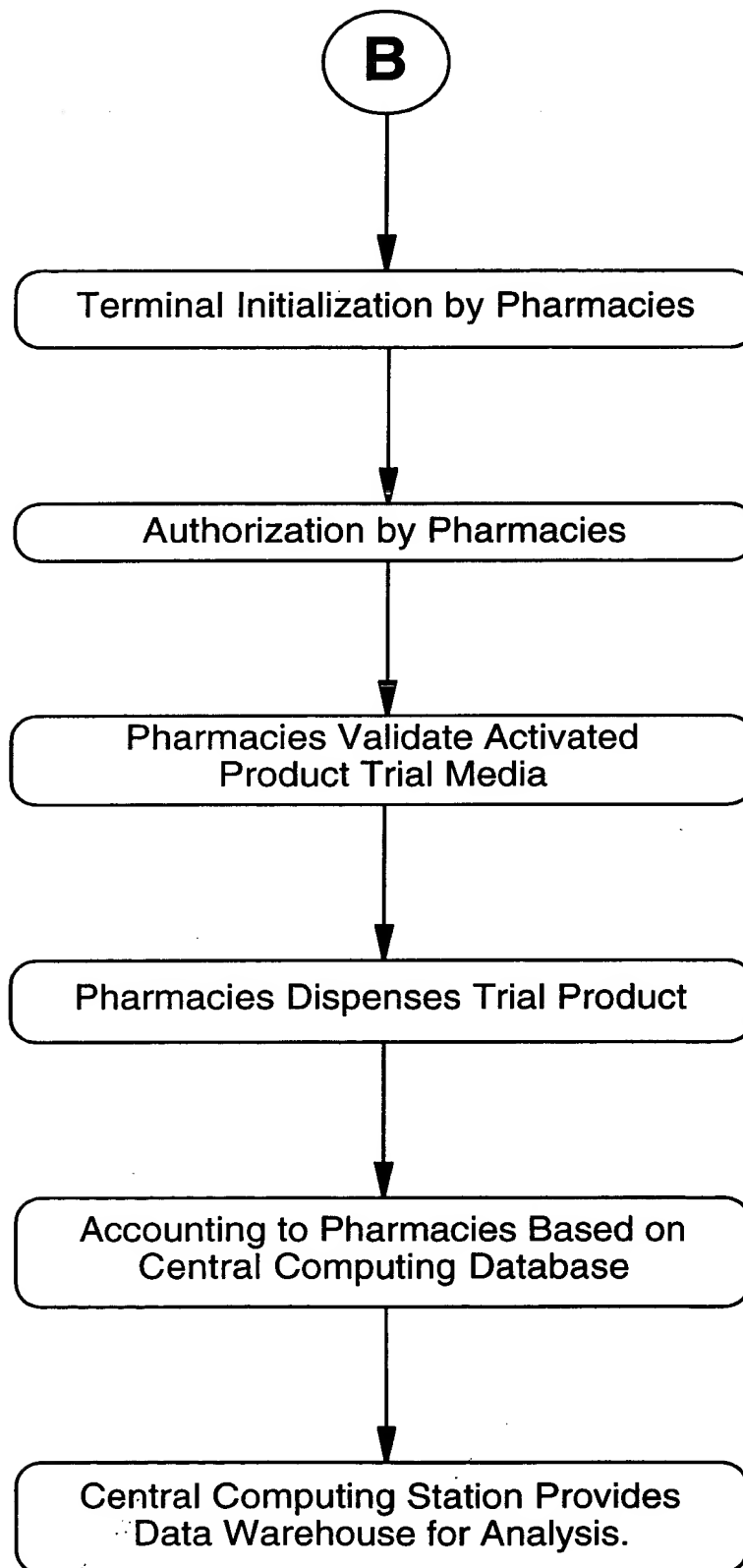


Figure 4B

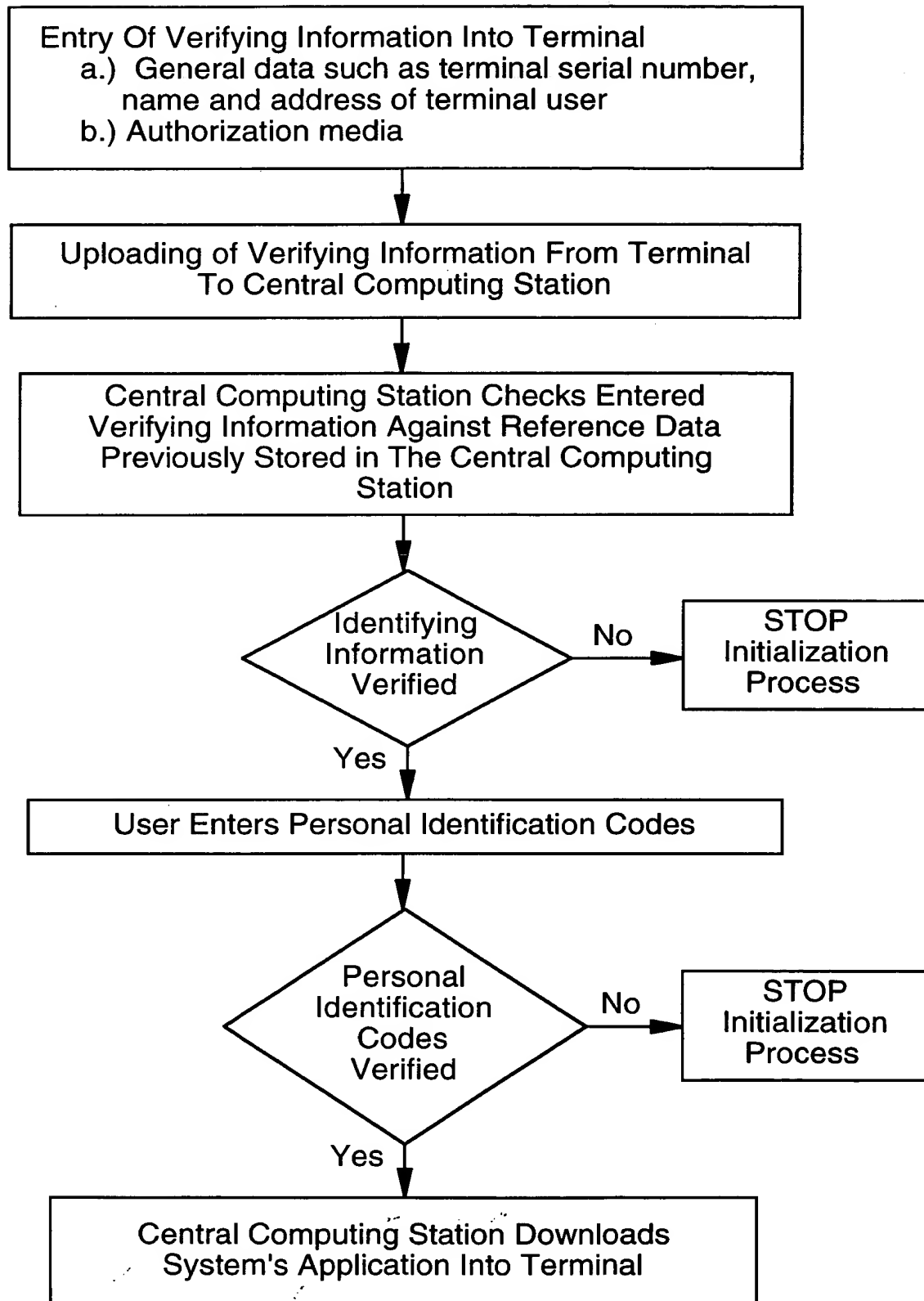


Figure 5

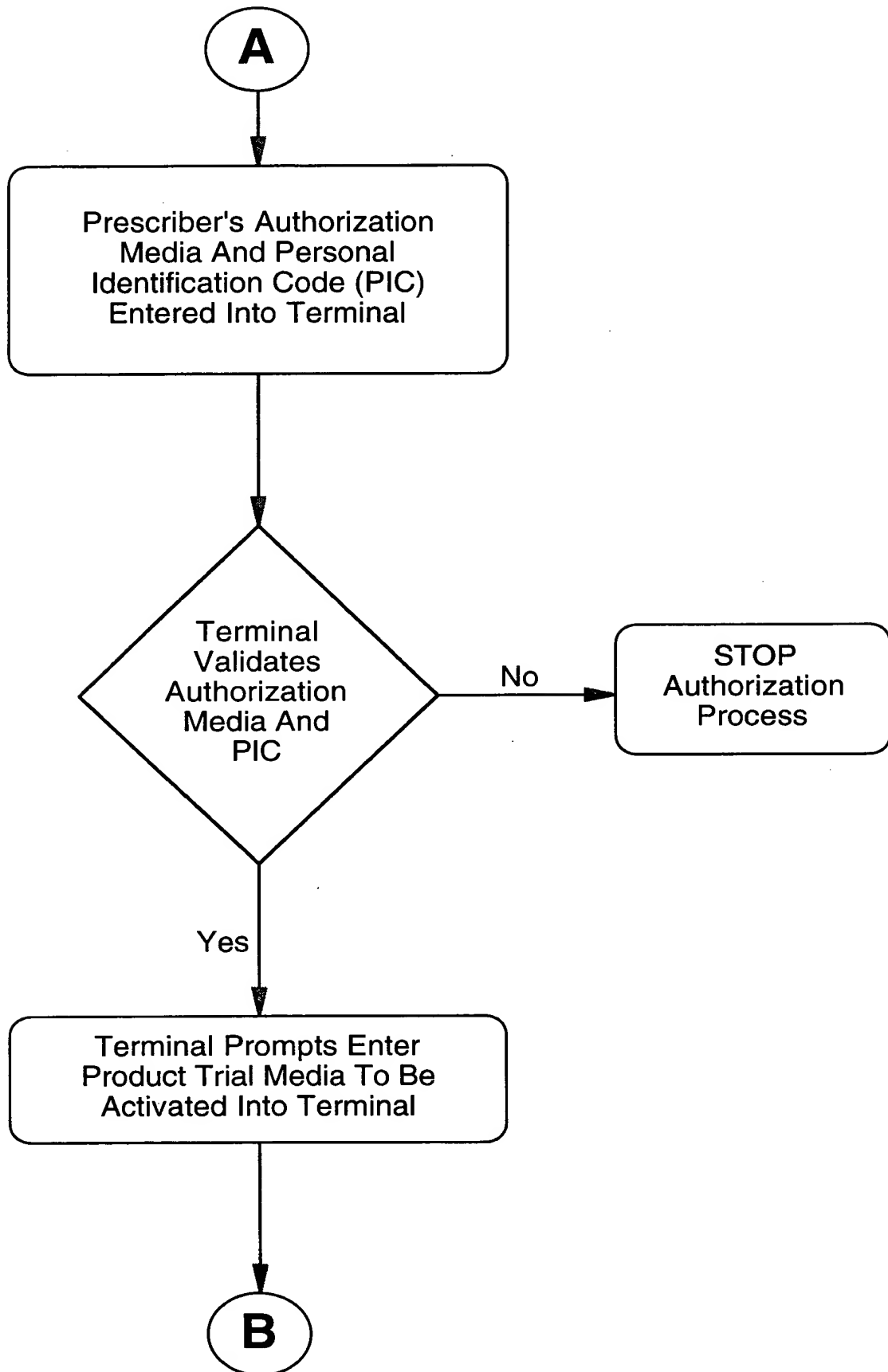


Figure 6A

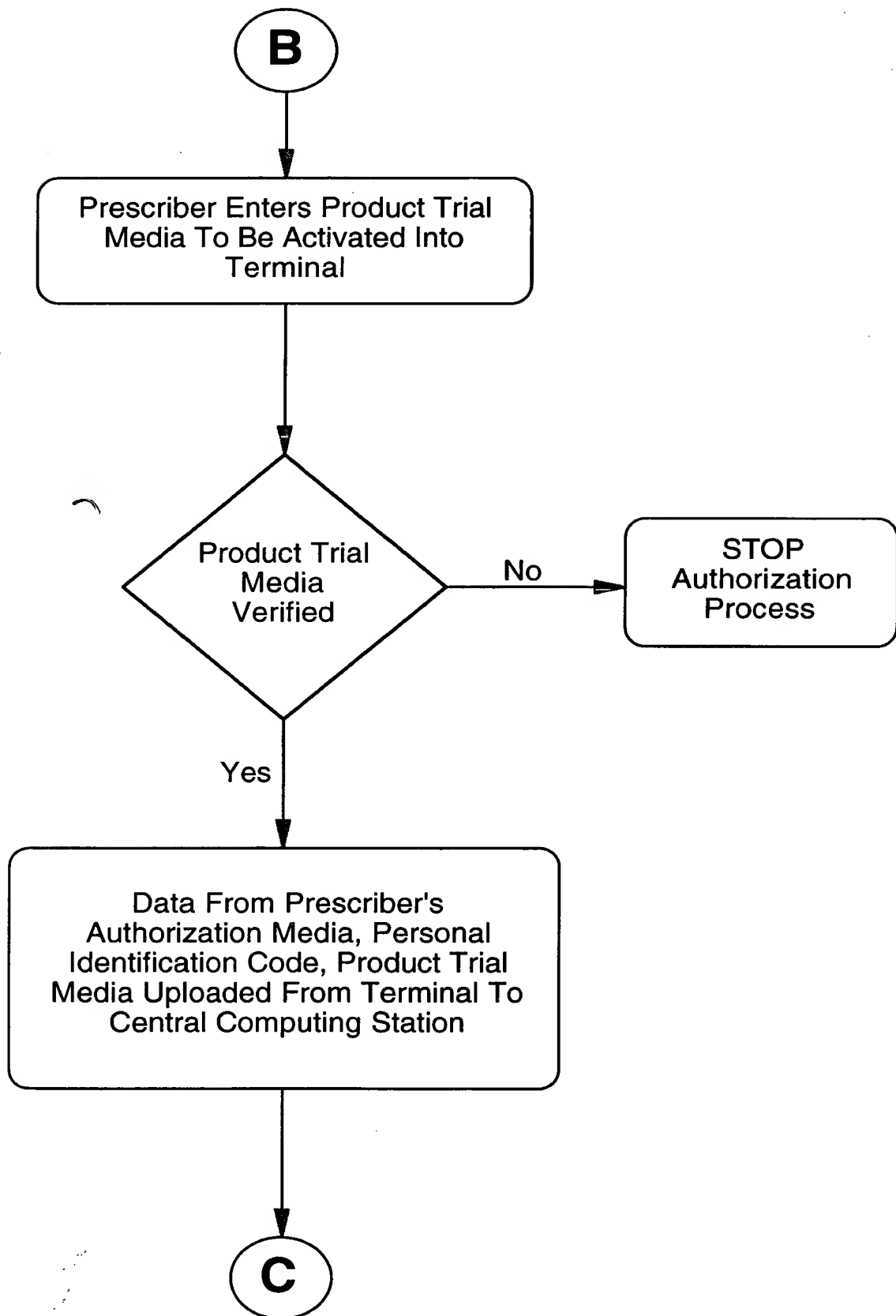


Figure 6B

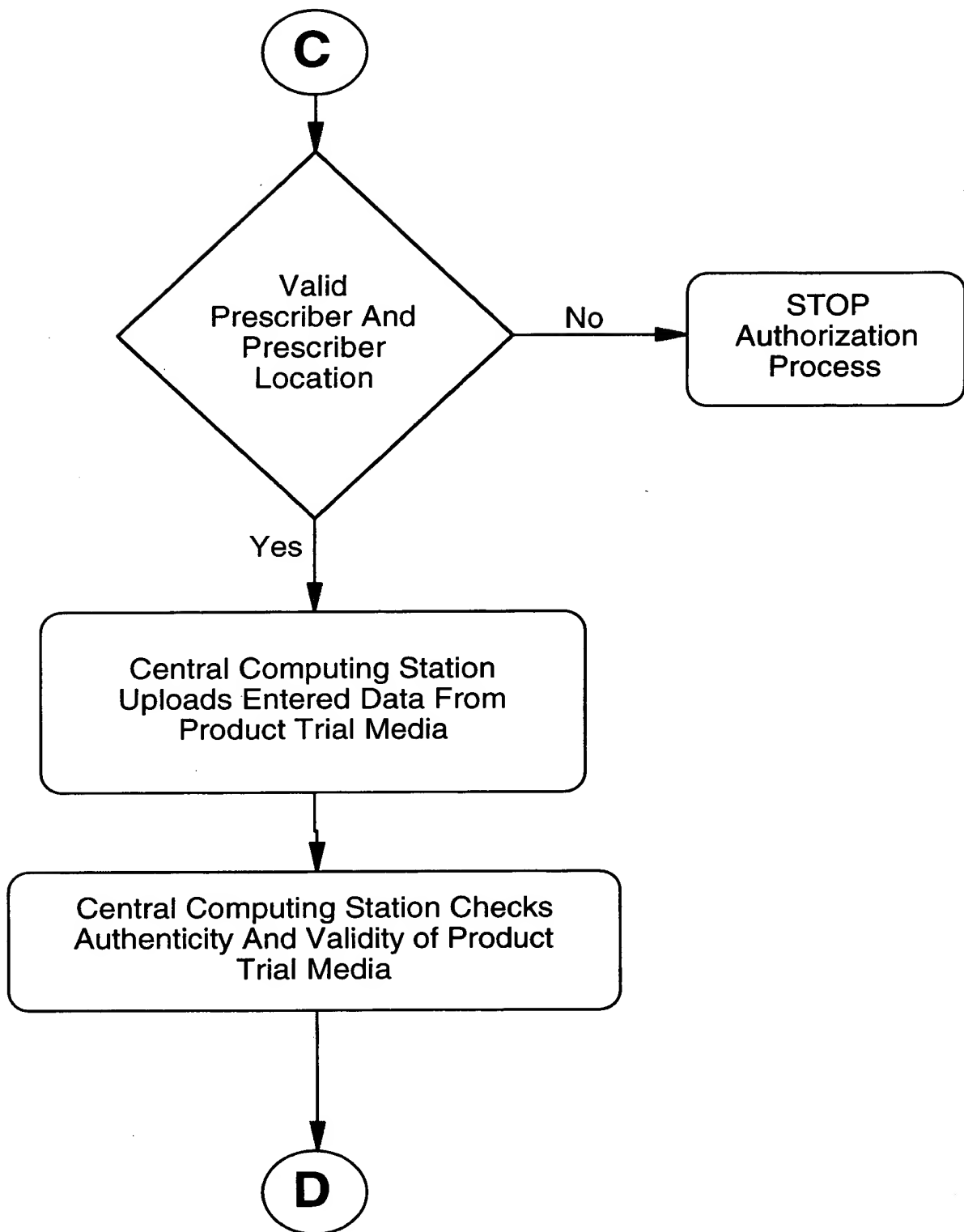


Figure 6C

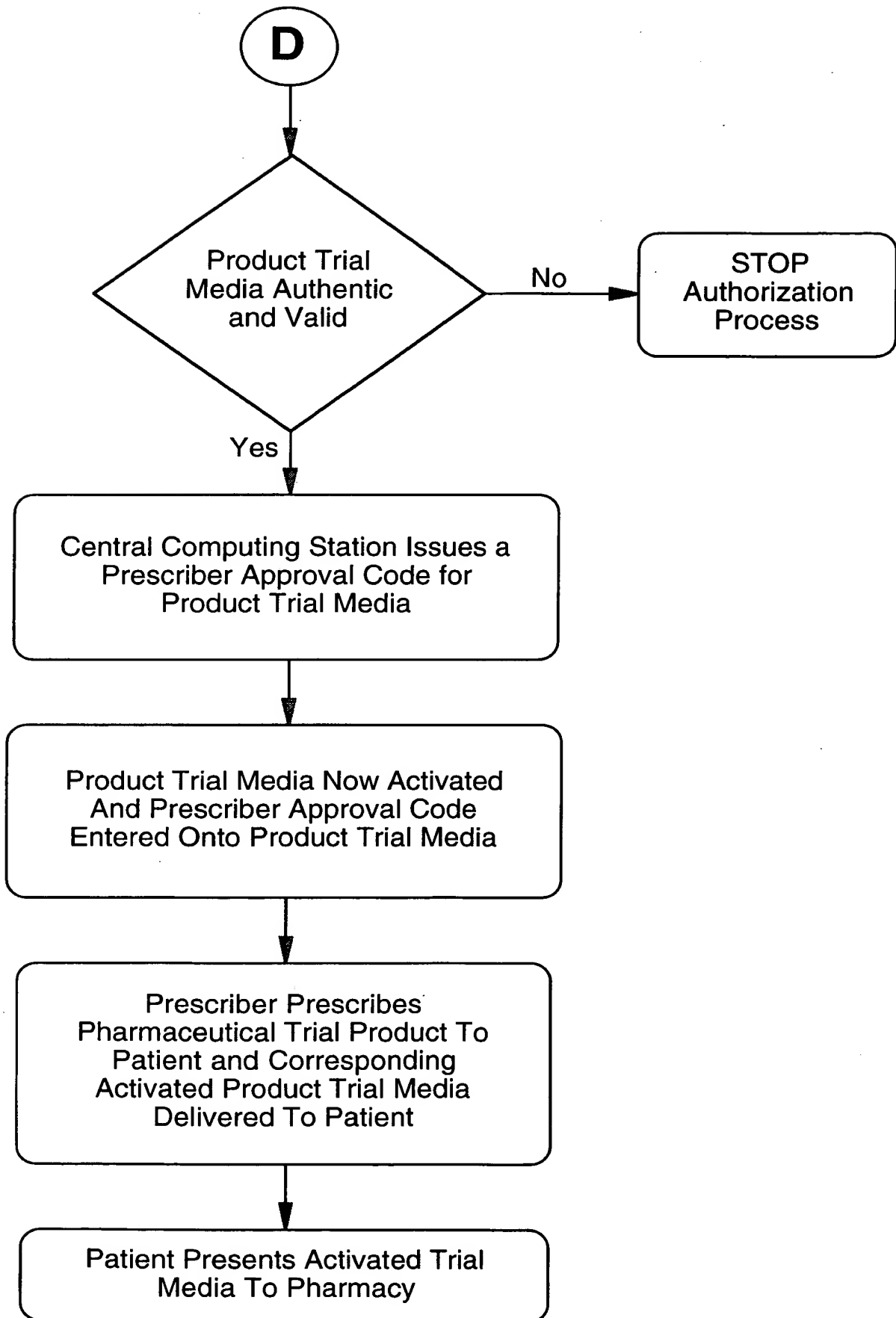


Figure 6D

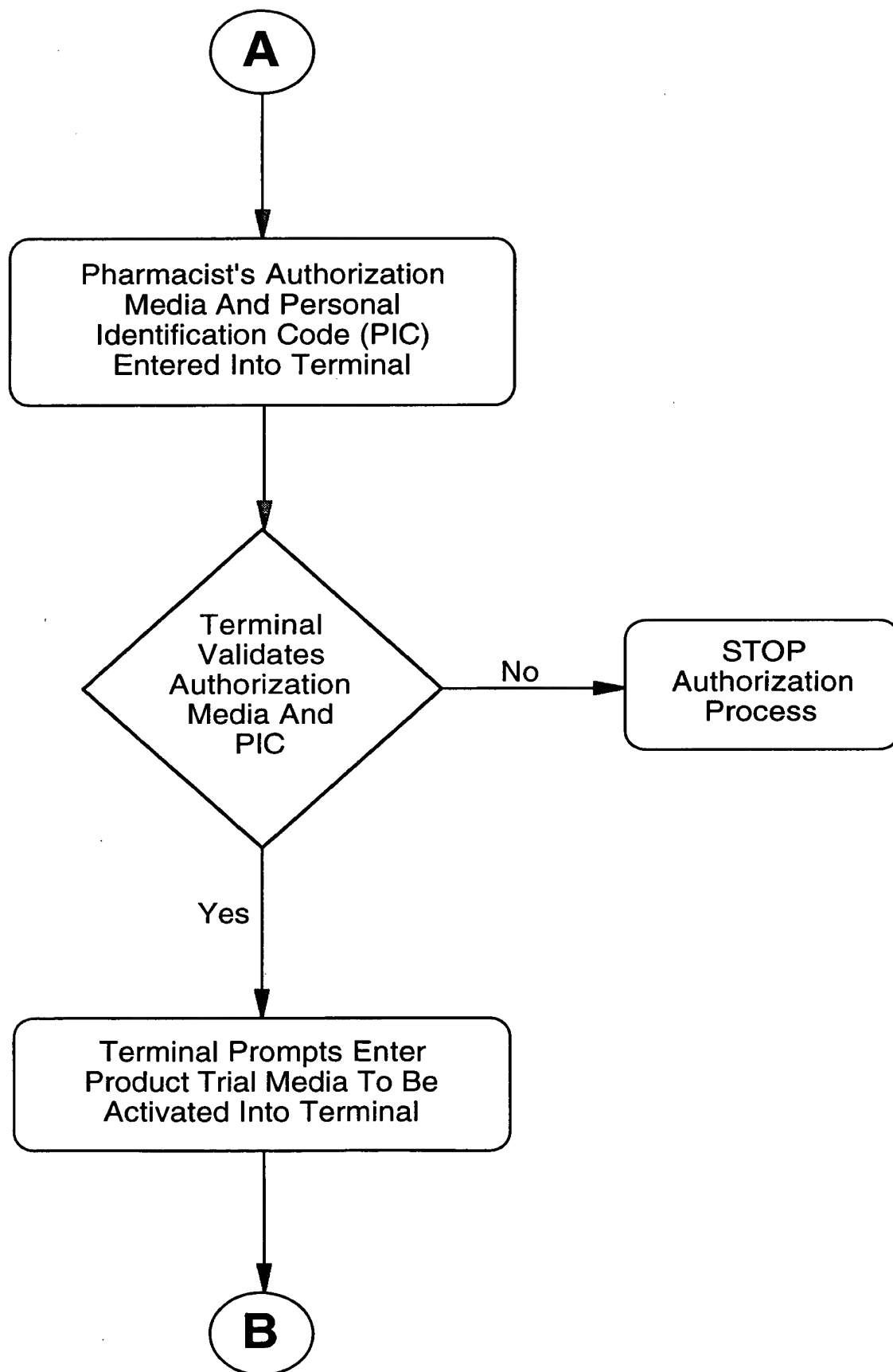


Figure 7A

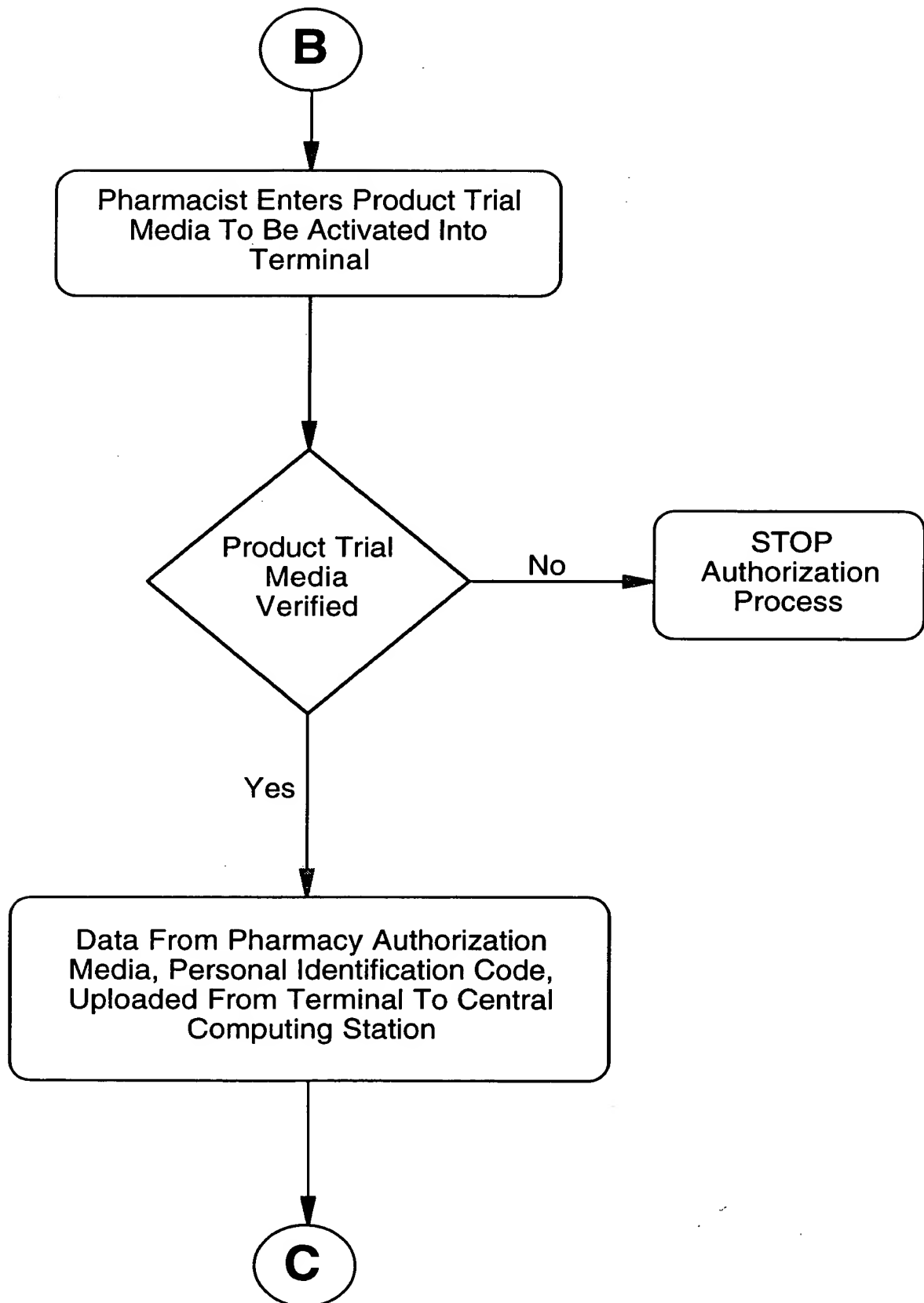


Figure 7B

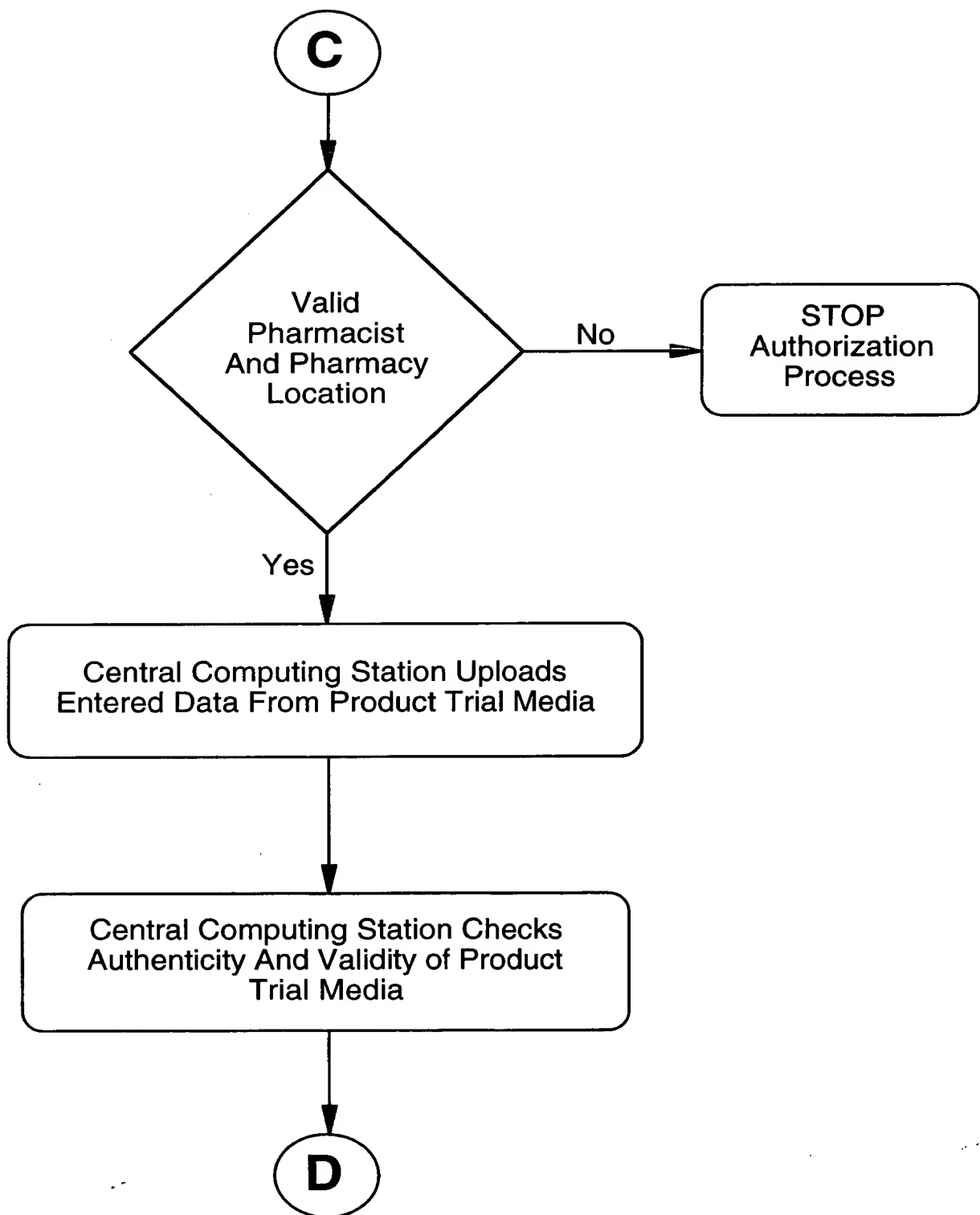


Figure 7C

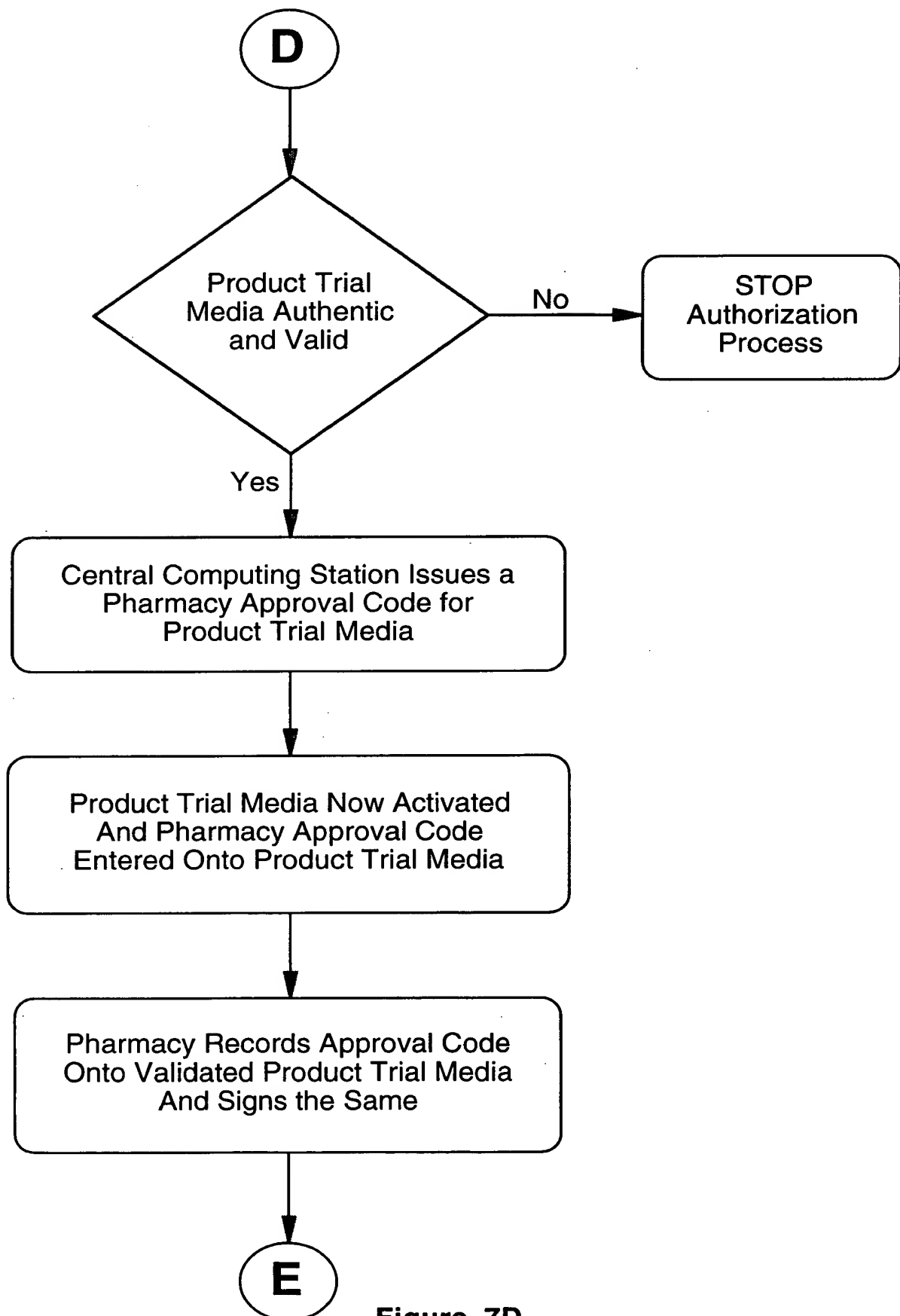


Figure 7D

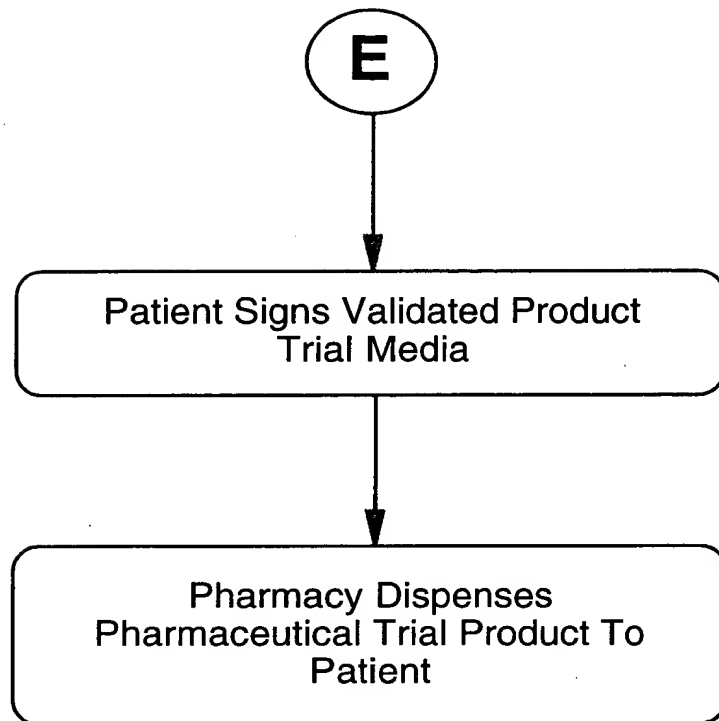


Figure 7E